PTO/SB/05 (08-00)

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Attorn	ey Docket No.	P-2507-US		•					
First I	nventor or Applica	lon identifier	YEDGAR, Saul	-					
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APPLIC See MPEP chapter 600 (Assistant Commissioner for Pate ADDRESS TO: Box Patent Application Washington, DC 20231								
(Submit an original	Form (e.g., PTO/SB/17) I and a duplicate for fee proce	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
2. Applicant claims sr See 37 CFR 1.27.	mall entity status.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
	[Total Pages ment set forth below)	1	a. Computer Readable Form (CRF)						
- Descriptive title of	r the invention s to Related Applications	b. Specification Sequence Listing on:							
	ding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or							
	uence listing, a table, gram listing appendix	_	c. Statements verifying identity of above copies						
- Background of the				ACCOM	ANYING A	PPLICATION	PARTS		
- oner Summary or	•	v	9.	Assignment	Papers (co	ver sheet & do	cument(s))	•	
- Brief Description of - Detailed Description - Claim(s)	of the Drawings (<i>if filed</i>) ion		10.	37 C.F.R. §: (when there	3.73(b) State Is an assigi	ement [_	Power of Attorne		
- Claim(s) - Abstract of the Dis	sciosure		11.	English Trai	nslation Doc	ument (if appli	cable)		
4 Drawing(s) (35 U.S	C.C. 113) [Total Sheets	1	12.	Information Discionure					
5 Oath or Declaration	[Total Pages	1	13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 5303) (Should be specifically itemized)						
a. Newly execut	ted (original or copy)								
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i. DELE	TION OF INVENTOR(S) atement attached deleting in	(-)	16.	•	Postcard				
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2. 1 1	a Sheet. See 37 CFR 1.76								
17. If a CONTINUING APPLI Application Data Sheet under 3	CATION, check appropriate	box, and suppl	ly the i	equisite information	below and	in a preliminar	y amendme	nt, or in an	
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Prior application informati	ONAL ADDS only The only	disclosure	Group/Art Unit:						
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Address One Crystal Park,	, Suite 210, 2011 Crystal Dri	/e							
City Arlington	//		Ά.			Zip Code	22202-37	09	
Country USA		phone (7	703) 40	36-0600		Fax	(703) 486	-0800	
Name (Print/Type) Mark S	. Crifan		Positive No. (All more)						
Signature	Registration No. (Attorney/Agent) 42,425				-				
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)710.00

Application Number	L L		
Filing Date		0.40	
First Named Inventor	YEDGAR, Saul		
Examiner Name		· · · · ·	
Group / Art Unit		9	
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SUBMITTED BY	Complete (if applicable)				
Name (Print /Type)	Mark S. Cohen	Registration No. (Attorney/Agent)	42,425	Telephone	(703) 486-0800
Signature				Date	January 10, 2001

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